

COUNTY OF YORK HUMAN SERVICES PLAN



DRAFT

2014-2015

June 24, 2014

Introduction

Background: York County has a long tradition of providing for the needs of its citizens. A county's prime responsibility, according to the County Code and Commonwealth Law, is to act in concert with the commonwealth to carry out a variety of services to meet the needs of its citizens. As a result of the state government shifting programs from the state to county level, the York County Commissioners developed and assigned the management of human service programs to a central administrative office, the York County Human Services Department.

The York County Human Services Department oversees the following human services related agencies:

- York/Adams Drug and Alcohol Commission
- York/Adams HealthChoices Management Unit
- York/Adams Mental Health-Intellectual and Developmental Disabilities Program
- York County Area Agency on Aging
- York County Office of Children, Youth & Families
- York County Youth Development Center
- York County Department of Veterans Affairs

It is the mission of the York County Human Services Department to provide equal access to services for the safety and well-being of all eligible residents, in a timely and cost effective manner. In order to accomplish this mission, York County strives to protect vulnerable children and adults, support communities and families in raising children who develop to their fullest potential, meet the basic needs within our community, and build healthy communities and self-reliant individuals.

Focus: This coordinated York County Human Services Plan will describe how the funding for the following funding streams will be utilized in order to serve York County residents in the least restrictive setting that is most appropriate for their needs. The Departments and funding streams included in this plan are:

- York County Human Services Department
 - Homeless Assistance Program, Human Services Development Fund
- York County Office of Children, Youth & Families
 - Special Grants
- York/Adams Drug & Alcohol Commission
 - Drug & Alcohol Act 152, BHSI
- York/Adams Mental Health-Intellectual and Developmental Disabilities Program
 - Mental Health Services- Community Programs
 - Intellectual Disabilities- Community Base Programs, Behavioral Health Services

Please refer to **Attachment A** for a diagram illustrating the York County Human Services Division organizational chart and the funding streams associated with this planning document.

County Planning Process

Stakeholder Involvement

The York County Human Services Division conducts a great amount of outreach in its planning efforts which include the funding streams incorporated in the York County Human Services Plan. A critical piece of the planning process involves assessing the needs within the community. York County accomplishes this by performing the functions enumerated below.

HS Coordinated Planning Team: The York County Human Services Division has engaged a group of individuals, including critical stakeholders, to act as the group who begins the planning activities for the HS Coordinated Plan. This group is comprised of county staff and providers of services that are constantly in discussion with consumers of our services to listen to recommendations and incorporate the feedback received. Consumers have been invited to participate in the process, but there has not been much interest for full participation at a meeting. The Planning Team is constantly brainstorming on how to increase consumer involvement.

In order to gather consumer feedback, the group also participates in many other committees and activities. A summary of these activities are included below.

System of Care: A primary vehicle for coordinated planning for the York County Human Services Plan will be the System of Care initiative, which York County began in 2011. The System of Care is a philosophy that builds on the benefits of systems integration and the strengths of youth and families. York County currently holds a monthly meeting to discuss needs of consumers and to share funding plans. This is an excellent resource to gather feedback from actual consumers of services. In addition to the Human Service Department leads, the group is comprised of family representatives, youth representatives, a Common Pleas Judge, the Chief Juvenile Probation Officer, and the Executive Director of the Lincoln Intermediate Unit No. 12. On Tuesday, June 10, 2014, the Coordinated Human Services Plan for FY 14-15 was discussed with the System of Care. Attendees discussed all aspects of the plan and offered feedback. The participants were also encouraged to attend the Public Meeting on June 24, 2014.

County-Wide Planning and Outreach: The York County Human Services Division is highly visible within the community and is involved in a great deal of systems outreach and networking. Department members frequently meet with consumers, residents, local officials, state officials, members of the judicial and legislative branches of government, non-profit providers, and many other entities to gather feedback and share plans for various funding streams. Feedback gathered from these relationships is a valuable tool in the needs assessment process.

The York County Human Services Division departments are able to assess community needs through regular contact with contracted providers. In-depth program monitoring and monthly reporting assist departments with understanding the specific needs of providers and consumers.

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In addition to working with contracted providers, York County Human Services Division personnel gather feedback regarding the funding streams managed via various committees and cross-system initiatives. These outlets are an opportunity to share and hear information representing a countywide interest while keeping a finger on the pulse of the needs within the community. A brief summary of these committees are as follows:

- **Continuum of Care-** provides oversight and guidance regarding community issues relating to homelessness and basic needs. Funding streams such as Emergency Solutions Grant (ESG), Emergency Food and Shelter Program (EFSP), and Homeless Assistance Program (HAP) are often topics of discussion during these meetings. Additionally, this group is utilized to share and collect information, assess proposals, and make recommendations for funding.
- **Family Issues Roundtable-** planning meetings result in quarterly breakfast training sessions that focus on information sharing and networking with agency and community participants. The goal of the group is to promote support for and awareness of family dynamics in the delivery of services and in the development of services to meet family and community needs. Meetings are attended by staff, community representatives, and public officials.
- **Children's Roundtable-** the oversight committee for certain children's related groups. The Roundtable works off a consent-driven agenda, where each subgroup sends a report to the roundtable for distribution prior to the meetings. The agendas are based on emerging needs or topics and the group serves as a support and/or mechanism to assist the subgroups. Membership on the Roundtable is cross-discipline and includes representatives from providers, medical, community agencies, and youth.
- **Communities that Care-** a process that uses preventative science research to promote positive youth development and prevent youth behavior problems. The process provides local control and flexibility to maintain support and sustainability and is guided by the results of a survey (Pennsylvania Youth Survey) that is conducted within our York County school system. York County has had exceptional success with this effort, with all but one district participating in the process.

Least Restrictive Setting

The York County Human Services Division takes special care to ensure that consumers are placed in the least restrictive, most appropriate setting as possible. York County accomplishes this through detailed individual assessments and through utilizing resources as efficiently as possible. The York County Office of Children, Youth & Families (YCOCYF) uses a team approach to promote use of the least restrictive setting for children and youth with agency involvement. YCOCYF pulls together professionals and family members to explore potential resources. York County recognizes that all consumers receiving services should be treated in an

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environment and manner that respects each client's individual worth, dignity, privacy, and enhances their personal autonomy.

However, with recent budget reductions, York County's ability to consistently maintain individuals in the least restrictive setting has been compromised. For example, with funding reductions to the Human Service Development Fund (HSDF), York County has been unable to provide a number of individuals with the Homemaker Service. The assistance provided with this funding allowed consumers to remain in their own homes, but when funding in the HSDF was drastically reduced over the years, service for most consumers was discontinued. This resulted in some consumers being placed in nursing home care at a per diem cost of approximately \$245.

Another example of funding reductions that has decreased York County's ability to ensure least restrictive setting is demonstrated in the Homeless Assistance Program. Due to funding cuts, less rental assistance has been provided to York County residents, forcing families into homeless situations. Studies show that homeless children experience more truancy issues. Truancy often results in a referral to YCOCYF, and a pattern has developed where judges are placing truant children directly from truancy court. The children are often placed at the York County operated Youth Development Center, where per diem rates top \$375.00.

Changes Based on Outcomes

There will be no substantial programmatic or funding changes made as a result of last year's outcomes. Programs continue to be strictly monitored programmatically and fiscally to ensure that York County is receiving the level of service as contracted. In the event that there are excess funds, money will be shifted to the greatest need within a permissible cost center.

Public Hearing Notice

In order to comply with the hearing notice requirements, the York County Human Services Department advertised the notice from June 21-22, inviting the community to provide input on the York County Human Services Plan during an open forum. The public meeting was held on Tuesday, June 24, 2014 beginning 6:00 PM at a local school, centrally located within York County. Please refer to **Attachment B** for documentation relating to this requirement.

In addition, a public notice was placed on the main page of the York County Human Services Department website, inviting the York County community to the meeting. Please see **Attachment C** for an example of this posting.

Public Hearing Summary and Comments

(INFORMATION FROM PUBLIC HEARING WILL BE ENTERED HERE)

Human Services Narrative: Mental Health Services

The mission of the York/Adams Mental Health and Intellectual and Developmental Disabilities Program (MH-IDD) is to serve, with respect, individuals in our community with mental illness, intellectual disabilities, and developmental delays in order to enhance their quality of life and provide an opportunity to reach their fullest potential.

Program Highlights

The York/Adams MH-IDD Program has made some significant achievements in FY 13-14. These enhancements are noted below.

- Provided funding to TrueNorth Wellness Services to purchase new furniture and supplies for their newly opened eight (8) person community residential rehabilitation (CRR) home located in Hanover, PA.
- Arranged for a one-day Behavioral Health Seminar for building veteran support and resource networks. The seminar was designed to identify aspects of the military culture that are not apparent to civilian clinicians; cite direct and subtle aspects of transition back to civilian life; and describe issues for families/spouses to consider when veterans return from deployment.
- Provided funding for non-MA eligible families for the “Building the ABC’s” program. This is a home-based clinical service for families facing the challenges of parental depression and early childhood developmental delays.

Please note: The programmatic achievements listed above were funded through one-time Act 87 funding. Without this funding, these enhancements would not have been able to occur.

- Partnered with York Family First Health to conduct mental health screening services for those they provide primary healthcare services for, with an emphasis on depressive disorders. This partnership has continued to expand to the Hanover and eastern Adams County area with plans to continue the expansion into the Gettysburg and Western Adams County Area. This evidenced-based model of integrated healthcare is further supported through funding for outpatient treatment for those individuals who would benefit from that level of support, as determined through the screening process, and do not have adequate health insurance coverage.
- The York/Adams HealthChoices Management Unit has undertaken an additional process to address and alleviate the unmet need associated with available psychiatry. In furtherance of Recovery-Oriented Systems Transformation, tele-psychiatry has been instituted as an available service for eligible individuals residing in York and Adams Counties.

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- Individuals in the lesbian, gay, bisexual and transgender community face a challenge every day. Too often members of the community are forced into uncomfortable situations where they must make decisions about being true to who they are or hiding in the closet as they risk potential rejection, condemnation, the denial of services or even violence simply for being who they are.

In an effort to meet the mental health and psychiatric services needs of lesbian, gay, bisexual and transgender individuals, the County MH Program has established a relationship with Alder Health Services to provide access to professional, affirmative counseling and psychiatric services at both the Agency's Harrisburg and Lancaster Health Centers. Their therapists, counselors and psychiatrists have a personal passion for and dedication to meeting the unique needs of the LGBT community

Strengths and Unmet Needs- Target Populations

The York/Adams MH-IDD Program has many strengths and unmet needs for target and specialized populations which are served by the behavioral health service system. The following provides a summary of strengths and unmet needs for these unique populations.

Older Adults

The County MH-IDD Program maintains ongoing memorandums of agreement with both The York County Area Agency on Aging and the Adams County Office of Aging outlining the reciprocating supports of each entity. To specifically target unmet needs of this population, the case management partnerships of each office meet regularly to ensure access to psychiatric and mental health supports are effectively accessed on behalf of this special population. Accessing psychiatric care for this population is an intermittent unmet need York and Adams Counties.

Through this partnership, timely access to adequate supports has improved, although remains an area of focus. Also a notable strength area is that management from all three agencies participates in an ongoing Personal Care Boarding Home Task Force to address issues and developments associated with this level of care and the residents who access these supports due to unmet housing needs. The task force also has representation from local Personal Care Boarding Home Administrators.

Adults

It is highly evident that stakeholders feel there is a significant unmet need regarding available psychiatry for both adults and children. During Fiscal Year 2013-2014 the County Mental Health Program was able to better address some of these unmet needs through enhancing the allocation provided to a number of Outpatient Mental Health Service Providers, thus ensuring more individuals were able to access this level of support. Additionally the York/Adams HealthChoices Management Unit, through an RFP process, introduced telepsychiatry to the area to provide evaluation and to bridge the gap until long term psychiatric services can be secured.

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While the priority population for adults has been those discharging from prison, the program is currently accepting referrals for all adults. The County MH-IDD program is also able to fund some of these services for non-MA individuals.

A major focus with adults for the mental health system this year has been looking at ways to integrate physical health and behavioral health services. Through the York/Adams HealthChoices Management Unit and Community Care, efforts to embed behavioral health services in FQHC's have continued. Other projects are being worked on that will emphasize this holistic approach to treating individuals and remains a focus in the upcoming year.

Through the Mental Health Matters Grant the County Mental Health Program was awarded during Fiscal Year 2013-2014, six individuals were trained in the Youth and/or Adult Mental Health First-Aid Training Curriculum, including two York City Police Officers. The two York City Police Officers trained in the adult curriculum have begun holding this training as in-service staff training for their fellow police officers within the York City Police Department. The officers have also scheduled trainings to be held in neighboring police departments in the area, with other trainings to be anticipated.

While one of the strength's of this system has been the number of housing options for adults, this would also be one of the biggest barriers for this same population. The lack of supported or supervised housing options can often be a reason individuals get stuck in high levels of treatment or bouncing unsuccessfully from service to service. Currently there are a minimum of 71 duplicated individuals on lists for housing provided through the mental health system. While every possible effort is made to support individuals through community based options, a number of individuals with high level needs can best be supported with housing options managed through the MH-IDD office and HealthChoices Housing program.

Transition-age Youth

Many providers of behavioral health support services in York and Adams Counties have services designed to meet the needs of different specific populations. Transition-age youth sensitive case-workers are available through Supported Housing Services, Resource Coordination and Intensive Case Management. A provider of Adult Community Residential Rehabilitation services has also introduced a transition-age youth sensitive caseworker, as this population continues to be in increasing need of this level of support. These support staff are a strength area as they are able to focus on this specific population through directing individualized supports geared towards the unique needs of this population. Accessing appropriate residential supports is a recognized unmet need of this population. Through the above noted targeted case support services, transition-age youth are provided with individualized supports to further enhance the skills required for independent living.

Another opportunity afforded transition-age youth is a monthly support group operated under the local affiliate of the National Alliance on Mental Illness: York County. Although located in

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York County, this support group is open to youth who are experiencing mental illness from both York and Adams Counties. NAMI York County has also initiated a support group for the family of transition-age youth. It is intended that this support group be available to parents, guardians and other natural supports of this special population, who are experiencing or have experienced mental illness or emotional disturbances.

Children

Youth Mental Health First-Aid Courses have been taught to the staff at the York County Youth Development Center, a shelter that houses children who do not require a detention level of support. These trainings further bolstered the Youth Development Center's employees' knowledge regarding youth and children with emotional disturbances, and was undertaken as a supplement to the existing outpatient counseling offered to the residents of the Youth Development Center by a service provider partner. These initiatives, along with the Student Assistance Programs in all school districts and CASSP Services, are intended to ensure any unmet psychiatric needs of children under 18 can most effectively be addressed.

The York/Adams HealthChoices Management Unit has targeted the expansion of outpatient services for selected areas, or for practitioners that have specific specialties. The county and its MCO continue to look at schools as a possible site for program expansion. School satellite services were expanded to one private school this year. Additionally individual practitioners were added to the network that had a focus on trauma and eating disorders. Along with therapy, telepsychiatry services were added with one of the populations being targeted children and youth. The use of these services has focused on evaluation and bridging the gap to face to face on-going treatment.

During Fiscal Year 2014-2015 the York/Adams HealthChoices Management Unit, through the use of reinvestment funds, is expanding the operation of *The Amazing Kids Club*. This service is geared towards children with an autism spectrum disorder. It has successfully operated in Hanover for many years, and this expansion will better avail children from the York area to access this support closer to home, as this program site will be in the York area.

Several Youth and Adult Mental Health First-Aid Trainings are scheduled moving forward in 2014-2015. Those being targeted include law enforcement, educational staff, healthcare staff and youth related support services.

While a range of services are available for children, evidence based services remain a priority when available and appropriate. In an effort to promote evidence based practices and therapies, the HealthChoices Management Unit has been targeting educational sessions and coordination meetings with providers of MST, FFT, MTFC and HFWA. Unfortunately even despite the best of efforts, the local MTFC program closed due to the restrictiveness of matching children and youth with host families that were seen as a good match.

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In an effort to enhance providers ability to work with individuals who have had trauma, Community Care and a local provider joined together to offer a Trauma Informed CBT multi-day training. Providers representing various levels of care participated. The training was geared to clinicians to better equip them to handle the clinical needs of those with significant traumatic life events.

Psychiatric care continues to be difficult for some children as does the reliance of many of the residents who look to one major provider to meet their needs. Other barriers are that while embedding services within schools seems like it would be helpful, providers still have a difficult engaging the families in treatment. For many of these students the lack of family involvement will significantly impact the ability for the student to progress as significantly.

Strengths and Unmet Needs- Special/Underserved Populations

Individuals Transitioning out of State Hospitals

As outlined in the County's response to the Pennsylvania Olmstead Plan, the county has processes being put into place to meet the needs of individuals transitioning from the State Hospital level of care. Utilizing the Community Support Plans for all individuals residing and receiving treatment at Wernersville State Hospital, a database is being developed that is inclusive of all individualized components of CSP's. This strength-based approach will serve as the primary resource for all the collective and individual needs for persons receiving this level of support. Every individual's CSP data is entered into the database upon completion and/or update of their Community Support Plans. From the database, the County MH-IDD Program can cull information that will identify what services, supports, and infrastructure will be needed for those individuals upon return to their home communities.

The database is intended to be a living document, subject to change based upon the dynamic needs of the persons we serve. The County will have a fully encompassing, current representation of the community based support needs of each individual receiving treatment and support at Wernersville State Hospital.

The lack of state hospital beds continues to be a barrier for York and Adams Counties. The current waiting list is 10-12 months with 5 individuals currently waiting. While the waiting list is not long in numbers, the amount of time individuals wait is problematic. In order for a person to gain admission to the state hospital, a discharge must occur. Most of the individuals at the state hospital continue to have behaviors that would be difficult to manage in the community. For many, barriers to discharge are usually related to the need for structured/supervised housing. The LTSR level of support could be a service that several individuals could benefit from as a transition to the community, however a vacancy can take years. Currently a minimum of 71 duplicated individuals are waiting for county funded housing services. While state hospital consumers are one group that is prioritized for openings, this number is thought to be greatly underestimated since many referral sources will not make application since the lists are too long.

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Most consumers cannot wait until an opening is available or the referral source will wait until an opening is imminent or in the throes of a crisis.

Co-occurring Mental Health/Substance Abuse

The County Mental Health Program has undertaken the training needs of a local service provider who is introducing an evidenced based model to treat co-occurring disorders. The service provider is implementing the *Hazeldon* Co-Occurring Mental Health and Substance Abuse Program in York and Adams Counties. This model integrates both Mental Health and Substance Use/Abuse Treatment on an outpatient basis. This highlighted partnership between the Mental Health Program and York/Adams Drug and Alcohol Commission to initiate this process has grown out of an ongoing recognition to meet the needs of the co-occurring disorders population. It is also believed that this partnership will assist in better serving unmet needs of the justice-involved population as well.

Justice-involved Individuals

York County continues to operate our Mental Health Court under the same auspices as we did starting in 2005; and this remains a very successful strength area. The York County Mental Health Court was nationally recognized in early 2011 as a Model Example of Treatment/Diversion Programs. By uniquely and individually supporting justice-involved individuals through the York County Mental Health Court, appropriate services are provided in a recovery-based setting, diverting this special population from incarceration while allowing these individuals to actively engage recovery processes while living in the community. This program has a less than 10% 3- year recidivism rate and less than 5% 2-year recidivism rate.

Also of relevance in regards to diversion, York County has implemented the nationally recognized training curriculum of the Memphis Model of Crisis Intervention for police officers. To date 76 police officers in York County have been trained in the Memphis Model of Crisis Intervention. Adams County has also begun the process of introducing law enforcement to the Memphis Model of Crisis Intervention and plans on training officers beginning Summer 2014.

Also a notable strength, Mental Health Caseworkers have collateral support of individuals being served through Drug Court, DUI Court and Veterans Court in York County. These case workers are able to individually direct supports and services for the special populations involved in Drug & DUI Courts and Veterans Court, with an emphasis on co-occurring disorders and veterans related or trauma related issues. This endeavor is a partnership between York/Adams MH-IDD Case Management and York/Adams Drug and Alcohol Commission and is designed to better address unmet psychiatric needs of these populations.

For justice-related individuals who are from or involved in the Adams County Court System, Justice Related Case Management is available through the County MH-IDD Program directly at the Adams County Adult Correctional Complex. The program does include an out-reach case

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worker who ensures access to the appropriate level of community-based psychiatric treatment while an individual is incarcerated. This service is available in addition to the existing psychiatric services already available through the facility's medical services. This program has shown benefit with reducing length of prison terms as well as establishing an individualized treatment program for individuals upon release from legal custody. Through this process, we have been better suited to address the unmet psychiatric needs of this population more effectively; however this remains an area of continued concentration, as accessing timely psychiatric services upon transition from legal custody to community re-introduction can be an intermittent unmet need of this population, based on unique circumstances.

Telepsychiatry has been introduced this year which targets individuals being released from prison. The York/Adams HealthChoices Management Unit in conjunction with partners from MH-IDD and the prison have been working to get individuals Medical Assistance applied for prior to release and to get psychiatric appointments scheduled prior to the consumer running out of medication post release. These telepsychiatry appointments can continue until a long term provider is found.

One of the biggest barriers for this population continues to be housing. While individuals being released from jail are often prioritized for housing support, there are not enough services to provide structured/supported housing to everyone that needs it when they need it. Additionally depending on the charges and history of the consumer, not all mental health or community housing resources are willing to work with the individual. Sex offenders are extremely difficult to assist in finding good supports. In addition to housing barriers, early information from the telepsychiatry service being offered has found that despite treatment being available, the no show rate continues to be high.

Veterans

Wellspan Behavioral Health hosts a Veterans PTSD Group that operates under the Veterans Administration recommended *Seeking Safety Model*. This strengths-based endeavor is also partnered with the York County Veterans Court. An additional support group has been established for individuals in the community who suffer from post-traumatic stress disorder, whether related to military involvement or not. Stakeholder feedback regarding these support groups has been positive, with many who attend feeling these programs address unmet needs by firmly establishing a local network of individuals with shared traumatic experiences.

Another program highlight related to veterans issues was the County Mental Health Program arranged for a one-day Behavioral Health Seminar for building veteran support and resource networks. The seminar was designed to identify aspects of the military culture that are not apparent to civilian clinicians, cite direct and subtle transitions back to civilian life and describe issues unique to families to consider when veterans return from deployment.

Lesbian/Gay/Bisexual/Transgender/Questioning/Intersex (LGBTQI):

An additional notable program highlight is that during Fiscal Year 2013-2014, the County Mental Health Program had initiated a partnership with Alder Healthcare Services, Inc. Through this relationship, individuals that identify as a member of the LGBTQ community will be afforded the opportunity to have their mental health and psychiatric needs met through more directed outpatient treatment, as indicated, should they choose to utilize this provider. The provider is recognized as having a specialization in meeting the unique needs associated with this special population and has extensive experience in serving this special population. The County Mental Health Program had not formerly offered these target supports to this special population, but is now more effectively addressing this unmet need through the partnership with Alder Healthcare Services.

Racial/Ethnic/Linguistic Minorities

Nearly all of the local community-based service providers maintain staff that is bi-lingual and more culturally sensitive to the needs of the Spanish speaking population. In addition, there is a community-based provider who offers a social rehabilitation program designed specifically for the Spanish speaking population. Through programs such as the *Senderos Social Rehabilitation Program*, partnerships have been established and continue to grow with the local Latin American Center, a resource frequently utilized as the first step for this special population to access community-based supports.

Recovery-Oriented Systems Transformation:

The York/Adams HealthChoices Management Unit has undertaken an additional process to address and alleviate the unmet need associated with available psychiatry. During the current fiscal year, in furtherance of Recovery-Oriented Systems Transformation, Tele-psychiatry has been instituted as an available service for eligible individuals residing in York and Adams Counties. The identified provider had begun offering this recovery-oriented service in early 2014. The introduction of this service has better met the needs of the local population, while affording those individuals access to care in a more-timely manner. This level of support has been very helpful in meeting the needs of individuals upon release from legal system custody.

Efforts continue at TrueNorth Wellness which is using the Common Ground system developed by Pat Deegan. The computer program that is used prior to the appointment helps consumers better focus their conversations with their psychiatrists and provides valuable information on their illness and medications, strengths and needs.

Intellectual Disability Services

The base service allocation continues to be a backbone to the provision of services to over 800 unduplicated consumers. Collectively, these same consumers represent a total of 1,564 duplicated services during the 2013-2014 fiscal year. The collective reduction of base services creates a further delineation of the “have’s” and “have not’s”. The decrease in funding over the last few years has certainly resulted in the reduction and in some cases elimination of necessary services to the most vulnerable consumers in the system. The trend of reduction to the base allocation has forced the Administrative Entity (AE) to be more creative in the utilization of those services, while eliminating others.

The following chart depicts the individuals who are receiving services funded by base dollars only. Home and Community services, specialized therapies, respite and transportation services have been added to the component to give a more accurate reflection of true numbers. These services were not included in the template in the County Human Services Plan Guidelines, but represent 345 duplicated services that are funded by base dollars during FY 2013-2014.

Cost Center	Funded Base Only	
	Estimated/Actual Individuals Served in FY 2013/14	Projected Individuals to be Served in FY 2014/15
Supported Employment	43	43
Sheltered Workshop (VR)	59	66
Adult Training Facility (C.Hab.)	6	9
Base Funded Supports Coordination	811	820
Residential (6400)	7	7
Lifesharing (6500)	1	1
PDS/AWC	0	0
PDS/VF	0	0
Family Driven Family Support Svcs.	292	318
Home & Comm. Habilitation	28	28
Specialized Therapies	2	2
Respite (Out/Home, Camps, LTA's)	297	295
Transportation Services	28	28

The continuum of services will reflect several aspects for consideration, including: maintain individuals in residential programs currently not eligible for waiver programs, increases in waiver rates equates to increases to base rates, further reducing the amount of available monies to the base funded individuals, reduction in available/qualified providers, flexibility of base

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dollars to allow the AE to manage/divert crisis situations as well as plan for those individuals transitioning from other systems by having the ability to provide one-time only funding.

The County Program will remain the Administrative Entity for the waiver Programs during 2014-2015. The AE will continue to function under the guidelines set forth in the Administrative Entity Operating Agreement under the DPW/ODP. As part of this requirement, the AE complies with self-assessment and oversight monitoring activities.

Supported Employment

Employment opportunities continue to be ever challenging in the market of today. A major day employer has seen a vast reduction in contracted work from industry related vendors. The recent reduction is enabling providers to realize additional options for service delivery. The unemployment rate has affected the job market for many consumers as well as making competitive opportunities to be limited.

Support Coordination Supervisory staff are members of transition councils in both county areas. The collaboration of the councils has enabled the County Program to participate in school educational fairs and to plan for life after school.

Base Funded Supports Coordination (SC)

The County Program does not distinguish base-funded SC from other funded individuals. Obviously, the differential comes into play as to the level and type of services that are able to be offered to the family/individual. The County Program will continue to provide seamless transition opportunities to individuals transitioning from facility based programs to community options.

Lifesharing Options

The County Program has continually been a proponent of lifeshare opportunities. Lifeshare expansion continues to be a goal set forth in the AE Quality Management Plan and will remain intact through 2015. At that time, the AE will determine if the appropriateness of the goal. We project expanding lifeshare to at least one additional individual over the next year.

Cross Systems Communications and Training

The County Program is quite active in providing cross training to other county agencies. Training sessions are held periodically to educate those in other agencies on the functions of the AE. Support Coordination staff receive a minimum of 40 hours of training each year to remain abreast of any changes in the system. There are also several in-service trainings conducted in-house to educate staff on any forthcoming changes in the system and protocol revisions.

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The AE continues to work with residential providers to provide community living arrangements for the most difficult to serve. The AE has been successful in utilizing a cluster of new providers to the area.

Emergency Supports

The AE continues to contract with two 24 hour crisis intervention entities for the provision of mental health emergency services. The providers are located in both of the counties. Wellspan Behavioral Health and TrueNorth Wellness Services are the contracted providers for this service. The AE also has after-hour telephone service through the Medical Dental Bureau that is able to be a liaison to the caller and an on-call staff including the County Administrator for true emergency situations. Again as with SC services the AE does not distinguish the difference between how an individual's services are funded and the receipt of emergency services. The AE also supports the operation of a respite home. The home is a licensed 6400 program and is available for emergency care.

The AE has also utilized waiver capacity management with ODP as a means of obtaining funds to provide emergency care for individuals.

Administrative Funding

The AE will continue to support the maintenance of effort for funded services as related to the Administrative Entity Operating Agreement. The AE receives an allocation of funds (both base and Medicaid waiver) for the purpose of maintaining the functions of the AEOA.

The AE supports the continuation of providing administrative support for the operation of the IM4Q program through a conflict free local program.

Homeless Assistance

The York County Human Services Department will continue to fund programming that provides a continuum of services to homeless and near homeless individuals and families. Programs such as the Bell Family Shelter and Individual Shelter Nights serve individuals and families who are experiencing homelessness. York County has two transitional housing programs for those who are homeless, but need extra assistance in “bridging” the gap to self sufficiency. While in our bridge programs, families work on life skills, finance issues, work issues, etc. For those who are “near homeless”, or facing eviction, York County offers a Rental Assistance Program, where individuals can receive assistance to assist with any arrears. Rental Assistance is also available to consumers who are currently homeless. Homeless Case Management is available to all individuals who qualify and need assistance in navigating the system and goal planning.

Unmet needs and gaps include the ability for York County to offer any new programming. With federal housing money also decreasing, York County has had to redirect HAP funds to emergency shelter, which drastically reduced the number of individuals served through rental assistance. As this is the only emergency family shelter in York County, it is crucial to keep this facility funded, so that the neediest of individuals are provided service.

Component	Est. Individuals served in FY 13-14	Projected Individuals to be served in FY 14-15
Bridge Housing	100	100
Case Management	630	630
Rental Assistance	2100	2100
Emergency Shelter	650	650
Other Housing Supports	---	---

The County of York received an allocation of \$877,388, and the details for the programs that will be funded in York County in FY 14-15 are as follows:

Bridge Housing

- **Transitional “Bridge” Housing- Domestic Violence:** A transitional housing program that provides domestic violence victims/families supportive housing up to one year, with the goal of consumers returning to the most independent life situation possible. The program has 11 housing units available.

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- **Transitional “Bridge” Housing:** A transitional housing program that provides homeless individuals/families supportive housing up to one year, with the goal of consumers returning to the most independent life situation possible. The program has 8 housing units available.

Both transitional housing programs are monitored annually and additionally if warranted. During the monitoring process, all facets of programming are reviewed for efficacy. If there are any deficient areas, the provider will be required to submit a corrective action plan, which will be followed-up on.

Success for these programs is defined as individuals who increase their education level or obtain employment while in the program. In the domestic violence transitional housing program, an important measure of success is if the consumer does not return to his/her abuser. In addition, through life skills workshops, staff may focus on teaching residents how to clean up any debt they may have. Therefore eliminating or reducing debt is another excellent measure of success. Both programs also consider consumers moving into permanent housing as the ultimate success.

Case Management

- **Homeless/Near Homeless Case Management:** This program assists homeless and near homeless individuals, who often face multiple problems, to work with a case manager to design and implement a set of customized plans that will ultimately lead to the solution of his/her problems over a period of time, while moving toward self-sufficiency. This Case Management service offers outreach at approximately 10 locations throughout York County.

This service is also monitored annually. Goal plans are reviewed to ensure that proper goals are being established by the consumer in conjunction with his/her case manager. The goal plans are also reviewed to determine if consumers are making progress while receiving case management services.

York County’s Case Management Provider, Community Progress Council, utilizes a sophisticated software system that analyzes the data input by the case management staff to generate outcomes. Outcomes include increased income, achievement of stable housing, etc.

Rental Assistance

- **Rental Assistance:** This program provides payments for rent arrearages and security deposits to prevent and/or end homelessness or near homelessness by maintaining individuals and families in their own residences. Households with income at or below 150% of the Federal Poverty Guidelines may qualify for assistance. Households that include children may be eligible for up to \$1000 in a 24-month period and adult-only households may be eligible for up to \$750 in a 24-month period

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Rental Assistance is monitored thoroughly on an annual basis with an intensive consumer file review, but also on a monthly basis through the review of the program's encumbrance report.

In addition, a weekly statement is reviewed which lists all of the consumers who received a rental assistance on his/her behalf for that week, along with the listing of landlords. This is reviewed to ensure that the landlord actually indeed owns the property. The agency is also monitored to ensure that landlords are screened through the medical assistance exclusionary process. This prevents any fraudulent landlords who are excluded from doing business with government agencies from receiving payments.

One measure of success for the Rental Assistance Program is the number of individuals who received assistance and are up to date on their rental payments six and twelve months later. Another success that is measured is the number of individuals and families where homelessness was prevented through the use of HAP funds. Lastly, the number of consumers which the homeless situation was resolved is tracked as an outcome.

Emergency Shelter

- **Emergency Shelter (Mass):** A temporary shelter for persons who are in immediate need and are homeless. Consumers may stay for a period of 30 days while they develop a housing plan. The Emergency Shelter that is funded with HAP funding is Bell Family Shelter, which serves families (including single fathers with children who are experiencing homeless) and single women when the census permits.

*****Please note that \$70,000 from HSDF funding will be utilized to supplement this HAP program/provider. *****

- **Emergency Shelter- Individual Shelter Nights:** This program provides emergency shelter assistance to homeless people who have no other reasonable source of shelter (i.e. no shelter space because shelters are at capacity and no family/friends housing resources). The service is also utilized when a homeless family may have a communicable disease. This service is provided by Community Progress Council's Case Management Unit, which requires daily contact with consumers in this programming to ensure that the individual/family moves to a shelter setting when appropriate.

Both shelter programs are monitored annually. Consumer files are reviewed to ensure that individuals/families who receive service meet situational and other eligibility criteria. Another monitoring technique used is for the monitor to attend house meetings at the shelter and speak directly to consumers regarding his/her experience and progress with established goals.

Successes for these programs include: increase in income, school enrollment for children, employment, resolution of health issues, and if the individual or family was able to exit the shelter into permanent housing.

Other Housing Supports

- **Non-Applicable:** York County has been meeting the very basic needs through these core services and has not been able to expand any services due to a lack of additional funding available.

Please note: There are no proposed programmatic changes to our HAP funded services for FY 14-15.

HMIS Implementation

- **HMIS:** York County's HMIS (YCHMIS) is fully implemented with Continuum of Care-funded agencies in York County. YCHMIS also includes several large faith-based homeless housing providers, and is implemented with HUD's Emergency Solutions Grant (ESG) providers as of November 2013 (with the exclusion of two (2) domestic violence providers due to Pennsylvania state law excluding their participation). The YCHMIS also added a new transitional housing program for families in May of 2014. York's HMIS is made up of a total of 8 homeless provider agencies, 24 programs, and 38 users. York County has successfully used the HMIS to produce three Annual Homeless Assessment Reports (AHAR's) that were accepted by HUD for use in the annual Congressional report.

Please note: Only one (1) HAP Provider currently participates in HMIS. One provider has been precluded from using HMIS due to serving victims of domestic violence.

Children and Youth Services

Please refer to the special grants plan in the Needs Based Plan and Budget for FY 2014-2015.

Drug and Alcohol Services

Overview and Access to Services

The York/Adams Drug & Alcohol Commission (YADAC) is charged with designing, coordinating and funding a comprehensive and coordinated array of services for the prevention, intervention, treatment and rehabilitation of alcohol and other drug abuse and dependency. The aforementioned integrated substance abuse service delivery system is executed through the establishment of contracts with licensed treatment providers, as well as prevention and intervention providers. YADAC contracts are established annually in order to meet the need of the community. Of the contracted services, most are offered locally. A detailed description and information on how to access the contracted treatment, prevention and intervention services follows:

Intervention

YADAC contracted intervention activities are aimed at assisting individuals through a specific crisis related to the abuse of drugs and/or alcohol. Services include evaluation to determine level of care needed to treat the addiction, counseling and appropriate referral for more intensive treatment. YADAC contracts with one intervention provider to provide outreach services and two providers to provide drug and alcohol Student Assistance Program Liaison (SAP) services. The SAP services are provided at the school level and include identification of students at risk, intervention and referral. Intervention services may be obtained by contacting a YADAC contracted intervention provider directly and requesting services.

Prevention

YADAC contracted prevention services incorporates education, information activities and programs that are aimed at increasing knowledge and understanding about drugs, tobacco and alcohol and their effects on youth, family and the community. Prevention activities are targeted at the total population with emphasis on reducing the possibility of alcohol, tobacco and substance abuse before it occurs. YADAC contracts with four prevention providers to provide prevention services. Individuals may access prevention services by contacting a YADAC contracted prevention service provider directly.

Treatment

YADAC contracted treatment and treatment related services include the case management core functions of screening, level of care assessment and case coordination, as well as the licensed rehabilitative clinical methodology designed to assist individuals to develop strategic modes to effectively deal with their critical problem of drug and alcohol use. YADAC holds treatment contracts for Outpatient, Intensive Outpatient, Partial Hospitalization, Medically Managed Detox, Medically Managed Short and Long Term Inpatient, Half-Way House and Methadone Maintenance services. Additionally, YADAC contracted treatment providers are qualified to

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provide specialty services to adolescents, pregnant females, veterans, co-occurring individuals, and females with children. The case management core functions of screening, level of care assessment, and case coordination are integrated into the treatment service agreements at the provider level. YADAC has fully executed contracts with 12 detox providers, 28 rehabilitation providers, 13 halfway house providers, 3 partial hospitalization providers, 9 intensive outpatient providers, and 16 outpatient providers and one methadone clinic located throughout the state. Individuals may access treatment services by contacting the White Deer Run Regional Support Center directly for detox services and the YADAC contracted Level of Care Assessment Center or YADAC contracted outpatient provider directly for all other services.

ACT 152 and the BHSI funds are specific to non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. While it is estimated that ACT 152 and BHSI funds may assist approximately 550 individuals in 2013-2014, the services mentioned above do not cover the full continuum of care. The funding available for the remaining treatment services (partial hospitalization; intensive outpatient; outpatient services; and medication assisted services) as well as the prevention and intervention services are made available through the following funding sources: County Match; DUI Fine; SAPT BG Treatment; SAPT BG; State Base; SAPT BG PWWDC; DRC Pass-through; Gaming; and SAP.

Waiting List Issues

As a result of the continued and significant increase in demand for YADAC funding for drug and alcohol inpatient treatment services (Medically Managed Short and Long Term Inpatient and Half-Way House) coupled with significant budget cuts to inpatient treatment funding (ACT 152 & BHSI) it became necessary during fiscal year 2012-2013 for YADAC to place limitations on inpatient treatment funding. These limitations restrict inpatient funding to the priority population of Pregnant Substance Users. The limitations were enacted to ensure that funding for the priority population of Pregnant Substance Users shall always be available. These limitations have continued throughout fiscal year 2013-2014 and are expected to continue into the next fiscal year. As a result of these limitations, many individuals appropriate for Medically Managed Short and Long Term Inpatient and Half-Way House services are unable to access these services. Individuals not falling into the priority population of Pregnant Substance Users typically seek community based treatment, thus creating waiting lists at that level of care.

County Human Service System Coordination

YADAC is not a stand-alone agency in that many agencies work collaboratively to combat the disease of addiction. The importance of collaboration and coordination between YADAC and other related systems in order to improve outcomes cannot be under emphasized. YADAC collaborates with many agencies within the County Human Services system and strives to continue to reach out to other Human Service departments in an effort to further expand its current collaboration.

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YADAC continues its collaborative efforts with the criminal justice system by supporting treatment courts and diversionary programs. YADAC began its collaboration with York County Treatment Court in 1997, when the first treatment court was established in York County. YADAC is proud to continue its support and collaboration of the York County Treatment Courts, through the assignment of full time designated Case Managers for the following treatment courts (York County Drug Treatment Court, York County Mental Health Treatment Court, York County DUI Treatment Court and Veterans Treatment court on a consultative basis). Additionally, YADAC supports a variety of diversionary programs, specifically the York County Day Reporting Center, as well as two Intermediate Punishment programs, and services at Adams County Adult Correctional Complex. Further, YADAC sits on both the York County Intermediate Punishment board as well as the York County Treatment Court advisory Board.

YADAC also continues to collaborate with and support York and Adams County Children, Youth and Families by collaborative efforts with prevention and intervention providers as well as by participating in the following Children, Youth and Family meetings as a means to collaborate on difficult cases, bridge service gaps, and suggest resources.

- Adams County Children and Youth Case Review Meetings
- Multi-Disciplinary Team Children and Youth Meetings
- REACH
- Children and Youth Triage Meetings.

YADAC continues its collaboration with MH-IDD including attending quarterly Crisis meetings, collaboration of provider monitoring of service quality as well as joint identification of co-occurring program and service barriers and needs.

YADAC has forged a strong relationship with the York/Adams Health Choices Management Unit in order to coordinate drug and alcohol services provided in the community as well as a variety of reinvestment initiatives. YADAC has monthly scheduled meetings with the York/Adams Health Choices Management Unit to ensure consistent communication.

Emerging Trends

Heroin and prescription painkiller abuse are ravaging families and communities across the state - urban, suburban, and rural alike. It is reported that drug overdoses have now surpassed motor vehicle accidents as the leading cause of accidental deaths in Pennsylvania, with Pennsylvania ranking 14th highest in number of drug overdose mortality rate in the United States. Law enforcement reports that heroin is more available and cheaper than nearly any other time in Pennsylvania. Availability and low cost compounded with increased purity rates and other lethal substances such as Fentanyl being cut with the heroin have resulted in a disturbing trend of increased drug overdoses and overdose deaths. As of May 2014, the York County Coroner statistics reports that the number heroin deaths in York County had already topped the number of deaths in 2013. Increased opioid use will likely result in an increased demand for substance abuse treatment, particularly detox and inpatient services. With limited funding for such

services, coupled with a scarcity of detox beds across the state, treating the overdose epidemic effectively will prove arduous.

Target Populations

Older Adults (ages 60 and above): The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services.

Adults (ages 18 and above): The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services.

Transition Age Youth (ages 18-26): The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services.

Adolescents (under 18): The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services.

Individuals with Co-Occurring Psychiatric and Substance Use Disorders: The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services. Of the 28 YADAC contracted rehabilitation providers, 10 are co-occurring programs.

Criminal Justice Involved Individuals: The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in

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YORK COUNTY HUMAN SERVICES PLAN FY 14-15

funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services.

Veterans: The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services.

Racial/Ethnic/Linguistic minorities: The Act 152 and BHSI funds are specific to the following drug and alcohol services: non-hospital detoxification services; non-hospital residential treatment services; and halfway house treatment services. Non-hospital detoxification services are not restricted, while limitations due to service demand increase and decrease in funding are in place for non-hospital residential treatment services and halfway house treatment services, thus restricting access to these services. Bi-Lingual and cultural/ethnic services are available at the treatment levels listed.

Recovery – Oriented Services

Currently these services are not covered under ACT 152 or BHSI funds, however increased collaboration with the York/Adams Health Choices Management Unit has brought the issue of recovery oriented services into focus. A number of ROSC centered reinvestment projects are pending, including substance abuse housing support services, relapse prevention services, and Buprenorphine coordination services, all of which York/Adams Health Choices Management Unit has collaborated with YADAC in regards. Challenges in moving towards a recovery-oriented system of care are the restriction of the proposed reinvestment services to certain funding sources, such as ACT 152, which requires Medicaid eligibility.

Human Services Development Fund

Services to be Provided: Over the past few years, the York County Human Services Department has had to eliminate programming and drastically reduce services, as a result of the funding reduction to HSDF. In FY 14-15, the County of York is scheduled to receive an amount of \$282,981. The details for the programs that will be funded are listed below.

Component	Est. Individuals served in FY 13-14	Projected Individuals to be served in FY 14-15
Adult Services	1	1
Aging Services	---	---
Generic Services	30,000	30,000
Specialized Services	-	-

- **Adult Services- Homemaker Services:** Provides personal care services in a person's own home to avoid costly nursing home placements (for individuals on waiting list for waiver services). One individual is currently served through this program. Due to the extreme funding cuts, this program is being phased out. However, the results of the last year's HS Survey indicated that many respondents would make referrals to this program for the consumers they serve if it was available.
- **Generic Services-Case Management:** Works with individuals who need assistance in navigating the system and assists families or individuals in developing a service plan to address unmet needs and linking to available resources. This service has become more important in the current economic climate where there has been an increase in families who are requesting public assistance for the first time and need help navigating the system.
- **Generic Services- Information and Referral:** Assists in the funding for PA 211 (formerly FIRST in York, PA), PA's free referral source. Links York County residents in need with the appropriate agencies or services via telephone or web.
- **Specialized Services:** N/A
- **Interagency Service Coordination:** The York County Human Services Department provides oversight to the departments that comprise the Human Services Division. This funding is used to support the administrative functions that are necessary in order for the smooth operation of the categorical departments. In addition, the Department holds many

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YORK COUNTY HUMAN SERVICES PLAN FY 14-15

coordination functions throughout the County, including Family Group Decision Making, Child and Adolescent Service System Program, Communities that Care, Systems of Care, etc. Funding in this line also includes a training budget that will provide learning opportunities to the entire Human Services Division. There is also a line item for communications, which is used to print various documents, including the Pocket Guide for the Homeless, a resource that is used by many professionals in York County, including law enforcement and other first responders.

In FY 13-14, HSDF service coordination funding was used to provide cross trainings to educate county employees and human service provider agencies. A total of twelve (12) sessions were coordinated, where 577 individuals attended and received training credit. Topics ranged from the LGBTQTI Issues and Resources to HIPAA and Confidentiality. The goal is to continue to expand this collaborative training effort in FY 14-15 and focus on topics such as family engagement and diversity.

- **Administration:** Administrative tasks such as planning, reporting, monitoring, and the provision of technical assistance to providers are charged to this category.
- **Categorical/Other:** Homeless Assistance- A temporary shelter for persons who are in immediate need and are homeless. Consumers may stay for a period of 30 days while they develop a housing plan. Bell Family Shelter serves approximately 600 individuals per year. **Please note: This will be characterized as a homeless service on the year-end report (as required for FY 13-14). ***Please see the HAP portion of this report for this information.*****

**York/Adams (for MH-IDD, D&A)
York (HAP and HSDF)**

**See Appendix C-3 for tie in with allocation letter*

MENTAL HEALTH SERVICES

	ESTIMATED CLIENTS	DPW ALLOCATION (STATE AND FEDERAL)	PLANNED EXPENDITURES (STATE AND FEDERAL)	COUNTY MATCH	OTHER PLANNED EXPENDITURES
ACT and CTT	3		60,000	0	
Administrator's Office			826,453	65,610	
Administrative Management	1,775		810,988	64,933	
Adult Developmental Training	0		0	0	
Children's Evidence Based Practices	0		0	0	
Children's Psychosocial Rehab	0		0	0	
Community Employment	16		29,112	3,000	
Community Residential Services	192		5,175,681	28,392	
Community Services	774		289,738	0	
Consumer Driven Services	0		0	0	
Crisis Intervention	0		0	0	
Emergency Services	15,415		1,035,834	94,195	
Facility Based Vocational Rehab	110		369,095	29,459	
Family Based Services	0		0	0	
Family Support Services	9		91,010	1,500	
Housing Support	144		2,307,060	21,517	
Other	0		0	0	
Outpatient	1,495		1,149,071	61,673	
Partial Hospitalization	31		45,000	0	
Peer Support	0		0	0	
Psychiatric Inpatient Hospitalization	18		60,800	0	
Psychiatric Rehabilitation	10		71,500	0	
Social Rehab Services	339		699,949	18,617	
Targeted Case Management	1,200		1,562,492	0	
Transitional and Community Integration	0		0	0	
TOTAL MH SERVICES	21,531	0	14,583,783	388,896	0

York/Adams (for MH-IDD, D&A) York (HAP and HSDF) <i>*See Appendix C-3 for tie in with allocation letter</i>	ESTIMATED	DPW ALLOCATION	PLANNED EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
CLIENTS		(STATE AND FEDERAL)	(STATE AND FEDERAL)		

INTELLECTUAL DISABILITIES SERVICES

Admin Office						
Case Management	820		941,344	62,610		
Community Residential Services	8		699,323	77,703		
Community Based Services	789		563,411	0		
Other	0		1,669,455	156,928		
			0	0		
TOTAL ID SERVICES	1,617	0	3,873,533	297,241		0

HOMELESS ASSISTANCE SERVICES

Bridge Housing	100		289,108			
Case Management	630		143,449			
Rental Assistance	2,100		314,831			
Emergency Shelter	650		135,000			
Other Housing Supports	0					
Administration			60,000			
TOTAL HAP SERVICES	3,480	0	942,388			0

*Shelter includes \$65,000 from HSDF

**York/Adams (for MH-ID, D&A)
York (HAP and HSDF)**

**See Appendix C-3 for tie in with allocation letter*

DRUG AND ALCOHOL SERVICES

ESTIMATED CLIENTS	DPW ALLOCATION (STATE AND FEDERAL)	PLANNED EXPENDITURES (STATE AND FEDERAL)	COUNTY MATCH	OTHER PLANNED EXPENDITURES
Act 152 Inpatient Non-Hospital	377	444,249		
Act 152 Administration				
BHSI Administration				
BHSI Inpatient Non-Hospital	111	222,650		
BHSI Inpatient Hospital				
BHSI Partial Hospitalization				
BHSI Outpatient/OP				
BHSI Medication Assisted Therapy				
BHSI Recovery Support Services				
BHSI Other Intervention				
BHSI Case/Care Management				
TOTAL DRUG AND ALCOHOL SERVICES	488	666,899		0

HUMAN SERVICES DEVELOPMENT FUND

Adult Services	1	4,000		
Aging Services				
Generic Services	28,000	138,683		
Specialized Services				
Children and Youth Services				
Interagency Coordination		47,000		
Administration		28,298		
TOTAL HUMAN SERVICES DEVELOPMENT FUND	28,001	217,981		0

**\$65,000 to HAP Shelter services*

GRAND TOTAL	55,117	0	20,284,584	686,137	0
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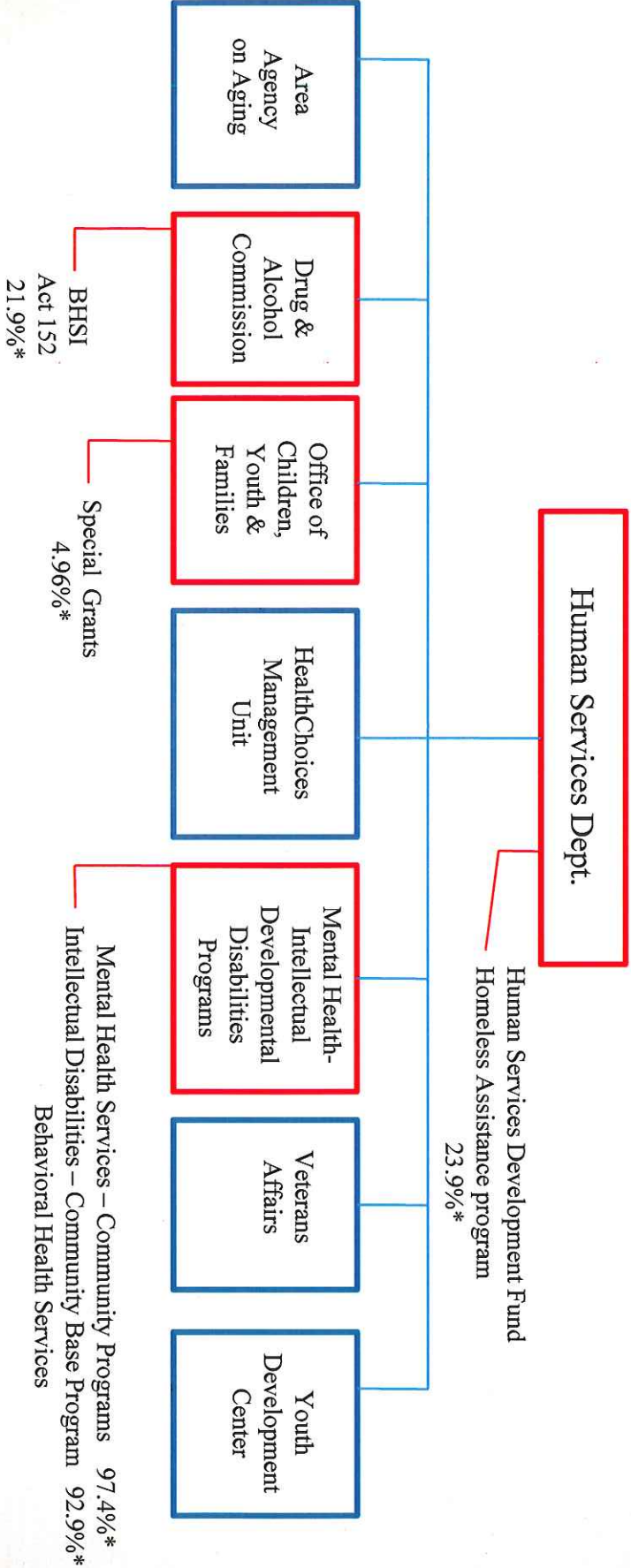
FY 14-15 Human Services Plan - Appendix C-3

SFY 13-14 Mental Health Primary Allocation by categorical *Per allocation letter dated 04.25.2014*

State Base	\$	13,951,675
BHSI	\$	227,659
Subtotal State	\$	14,179,334
SSBG	\$	68,432
CMHBG	\$	289,143
PATH Homeless	\$	46,874
Subtotal Fed	\$	404,449
TOTAL ALLOCATION (without pass thru monies & Act 87 carryover)	\$	14,583,783
Plus Allocated Pass Thru Project Funds and OTO:		
Act 87 carryover - OTO - State \$s	\$	361,959
MH Matters County Grant - OTO - State \$s	\$	10,000
MH Matters Project Grant - OTO - State \$s pass thru	\$	36,750
Veterans Project - State \$s	\$	604,780
State Tribal YSC - Fed \$s	\$	516,960
Jail Diversion - Fed \$s	\$	269,774
Child MH Initiative - Fed \$s	\$	2,600,000
Bioterrorism Hosp Preparedness - Fed \$s	\$	231,500
Capitalization of Performance Outcomes - Fed \$s	\$	59,000
CDC - Bioterrorism Pandemic Flue - Fed \$s	\$	50,759
Wellness Older Adult Peer Supports - Fed \$s	\$	115,500
Total Allocation - all combined = letter dated 4/25/2014.	\$	19,440,765

HUMAN SERVICES PLAN

FUNDING STREAMS



* Indicates percentage of department budget

YORK DAILY RECORD

CLASSIFIEDS 

SATURDAY, JUNE 21, 2014

PUBLIC HEARING

York County Human Services Division

Public Notice is hereby given that the York County Human Services Division will hold a special public meeting regarding its York County Human Services Plan. The meeting will be held on June 24, 2014 at 6:00 pm at 300 East 7th Avenue, York, PA. The plan will include the following: Homeless Assistance Program, Human Services Development Fund, Office of Children, Youth & Families Special Grants, York/Adams Drug & Alcohol Commission Inpatient Treatment, Mental Health Community Base Services, and Intellectual Disabilities Community Base Services.

Immediately following there will be a Public Hearing for York County Children, Youth & Families and Juvenile Probation Office regarding its annual budget and plan submission.

Human Services Department - Windows Internet Explorer

http://yorkcountypa.gov/health-human-services/human-services-division.html

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Y Human Services Department

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WELCOME TO THE HUMAN SERVICES DIVISION!

JOIN US!

ASSISTANCE/SERVICES

Looking for Assistance or Services?

NEED HELP?

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FAMILY FIRST


Phone: 2-1-1 / 717-755-1000

ANNOUNCEMENTS

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YORK COUNTY HUMAN SERVICES

OFFERS A PUBLIC MEETING
to present & receive feedback on the
2014-15 Human Services Coordinated Plan.

The plan will include the following funding streams:

- Homeless Assistance Program
- Human Services Development Fund
- Office of Children, Youth & Families Special Grants
- York Adams Drug & Alcohol Co-occurring Inpatient Treatment
- Mental Health Community Based Services
- Intellectual Disabilities Community Based Services

ON TUESDAY, June 24, 2014
4:00 PM—6:30 PM

At the York Training Center
300 East 7th Avenue, York, PA

Immediately following there will be a Public Meeting for the York County Children, Youth & Families and Juvenile Probation Office regarding its annual budget and plan submission

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